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<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/606,208		Filing Date 26 June, 2003		<input type="checkbox"/> To be Mailed					
				Applicant(s) GASKINS ET AL.						Page 1 of 2			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51						
2							52						
3							53						
4							54						
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39							89						
40							90						
41							91						
42							92						
43							93						
44							94			1			
45							95			1			
46							96			1			
47							97			1			
48							98			1			
49							99				1		
50							100				1		
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

Part of Paper No20080718-1.

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				Applicant(s) <b>GASKINS ET AL.</b>				Page 2 of 2					
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 06/30/08		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
101				1			151						
102				1			152						
103							153						
104							154						
105							155						
106				1			156						
107				1			157						
108							158						
109							159						
110							160						
111				1			161						
112				1			162						
113				1			163						
114				1			164						
115				1			165						
116				1			166						
117				1			167						
118				1			168						
119				1			169						
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146							196						
147							197						
148							198						
149							199						
150							200						
Total Indep			5				Total Indep						
Total Depend				19			Total Depend						
Total Claims			24				Total Claims						

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